

Review of: "Decolonisation of Health in East Africa: Opinion Piece"

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Potential competing interests: No potential competing interests to declare.

Thank you for the opportunity to review this article.

Although I believe this article covers important topics and is worthwhile, it could be significantly improved by streamlining the focus and writing, as follows:

- the abstract focuses heavily on the UK National Health Service, and it seemed so far off the topic in the article title that I actually stopped reading it halfway through and double-checked that I was reviewing the correct article. I strongly urge the authors to rewrite the abstract after the full article has been revised, making sure that the abstract reflects the contents of the entire article and provides a concise and accurate overview.
- The strongest sections of this article are "Changing Clinical Practice" and "Academic Challenges," which provide focused, well-substantiated arguments and examples of both the impact of colonialism on healthcare and the health workforce in East Africa, as well as concrete ideas and suggestions as to how to counter that impact and move toward decolonization. I'd suggest condensing and revising (see below for suggestions) the Introduction, Workforce, and Politics sections to move more quickly to these stronger, more focused sections.
- For the introduction section...honestly, I'm not sure you even need this for an opinion piece. I think you could dive right into the piece with 1-2 introductory sentences acknowledging the long history of colonialism in Africa, its ongoing adverse impact on health and medicine on the continent, and the pressing and overdue need for widespread changes to decolonize health. You could cite the sources you mentioned all together at the end of these two sentences (or so) and get right into the heart of your piece. At the moment, these early sections feel a bit unfocused to me, and I think you may lose readers' interests if you don't focus and streamline.
- Both the "Workforce" and "Politics" sections of this paper bring forward interesting topics, and yet they read in a way that is more focused on the UK and its history of colonialism than on decolonizing health. Also, the tone of these sections is much angrier than the later sections. I don't begrudge the authors the angry tone; it's certainly warranted when considering the grievous, ongoing impact of colonialism on health and healthcare in Africa, but I'd suggest a careful revision of the entire piece to try to keep the tone consistent throughout. Right now, it reads as though several different authors wrote the different sections. That's jarring for the reader and, more importantly, does a disservice to the readability and, in my view, impact of this piece.
- I'd suggest including in the Academic Challenges section some mention of the fact that funders in the Global North almost always set the priorities for funding opportunities that impact health and health care in Africa, and so these

funding opportunities tend to be focused on what Global North, AKA former colonizers, want done/improved in Africa. This is neocolonialism, and a major problem. You dance around this issue a bit in your piece, but, if you agree with me, I'd urge you to state this explicitly. Decolonizing health care in Africa and other parts of the Global South will require shifting away from the national security and other priorities that infuse so much of Global North-driven funding and toward the many other issues that exact such tremendous cost in morbidity and mortality globally, such as NCDs and mental health, as you point out earlier in this piece.

- I really like how you added in the EDIJ elements at the end of this piece. Nicely done.
- I applaud the authors for publicly taking on this important topic. It takes courage to challenge the existing power structures and paradigms, but without such courage, nothing changes. Best of luck with this piece and your ongoing work.